## Summary of Benefits Report for Alabama, CHIP InsureKidsNow.gov

<b>Preventive Service</b>	es			
	Is the service Covered?	Frequency	List any service -	specific limitations
Cleanings	Yes	2 x year		
Fluoride treatments (including fluoride varnishes)	Yes	2 x year	Provision by hygienist must be under supervision of dentist. Flouride treatments can also be provided by approved medical providers for enrollees 6 months to 36 months of age.	
Sealants (list any tooth-specific limits)	Yes	1 x year	For teeth 2, 3, 14, 15, 18, 19, 30 & 31	
Space maintainers	Yes			
<b>Diagnostic Service</b>	es			
	Is the service Covered?	Frequency	List any service - specific limitations	Recommended age of first visit ?
Dental examinations	Yes	2 x year		3
X-Rays			1	
Bitewing	Yes	2 x year		
Full Mouth	Yes	1 x every 3 years		
Panoramic	Yes	1 x every 3 years		
<b>Treatment Service</b>	s			
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage
Fillings			1	
Silver amalgam	Yes			
Tooth colored composite	Yes			
Crowns/tooth caps		·		
Stainless steel crowns	Yes		Will replace every 5 years	
Metal (only) crowns	Yes		Will replace every 5 years	
Metal/porcelain crowns	Yes		Will replace every 5 years	
Porcelain (only) crowns	Yes		Will replace every 5 years	
Root Canals (endodor	ntics)		1	
Root canals on baby teeth (pulpotomies)	Yes			
Root canals on permanent teeth	Yes			
Gum (periodontal) therapy	Yes			
Dentures				1
Partial dentures	Yes			
Complete dentures	Yes			
Bridges	Yes			
Orthodontics*				

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Treatment Services					
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage	
Retainers (orthodontic)	Yes		Retainers are covered as a medical benefit as a part of an orthodontia treatment plan for certain medical conditions. See list of qualifying conditions below.		
Braces	Yes			Benefits for orthodontia services are only provided for the following conditions: cleft palate or cleft lip deformities, cleft lip and alveolar process involvement, veropharyngeal incompetence, short palate, submucous cleft, alveolar notch, or trauma, disease or dysplasias resulting in significant facial growth impact or jaw deformity, craniofacial anomalies, including, but not limited to, hemifacial microsomia, craniostyostosis syndrome, Marfan's syndrome, Apert's syndrome, Crouzon's syndrome, or other syndromes by review.	
Oral surgery					
Simple extractions	Yes				
Surgical extractions	Yes				
Care of abscesses	Yes				
Cleft palate treatment	Yes		Covered as a medical benefit		
Cancer treatment	Yes		Covered as a medical benefit		
Treatment of fractures	Yes		Covered as a medical benefit		
Biopsies	Yes		Covered as a medical benefit		
Treatment of jaw joint problems (TMJ)	Yes		Covered as a medical benefit		
Emergency room services provided by a dentist	Yes		Covered as a medical benefit		
Inpatient Hospital Services	Yes			For purposes of anesthesia administration for children aged 8 years and younger or enrollees who meet medical necessity	

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Treatment Services						
	Is the service Covered?	Frequency	List any service - specific limitations	Criteria for coverage		
Anesthesia						
General anesthesia	Yes					
Intravenous conscious sedation	Yes					
Non-intravenous conscious sedation	Yes					
Analgesia (nitrous oxide)	Yes					

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<sup>\*</sup> When this information is posted on the Insure Kids Now website, we will include a special note for orthodontic services explaining that parents and caretakers should work with their child's orthodontist to ensure that the treatment and payment terms and conditions are clear at the outset of treatment (for example, what happens in the case of a child who becomes ineligible for Medicaid or CHIP while he or she is undergoing orthodontic treatment?).